rat-borne diseases in South Gujarat in the last week of August, 1997;

(b) if so, how many such patients were treated in South Gujarat; and

(c) the steps taken to check the spread of the disease?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes, Sir. Some persons died due to Laptospirosis which is a rodent-borne disease.

(b) Total 657 patients of suspected Leptospirosis (one of the Zoontic) were treated from 17.7.97 to 20.10.97 in South Gujarat out of which 86 cases were serologically confirmed for leptospirosis.

(c) 1. Arrangements were made for admission and appropriate treatment of cases in district hospitals and other important towns.

2. House to house survey in two districts was undertaken for fever cases. Cases in contracts were given chloroquin and tetracycline tablets.

3. 450 teams in Valsad disrict and 244 teams in Surat district worked in the affected areas to provide health education to the community, and to organise surveys.

4. Distribution of health education material.

5. Rodent control measure.

6. Training workshop was organised at Valsad & Surat.

Misuse of Public Fund by the Regional Medical Research Centre at Bhubaneshwar

998. SHRI SANATAN BISI: Will the PRIME MINISTER be pleased to state:

(a) whether any team has visited Orissa to conduct an inquiry regarding misuse of public funds by the Bhubaneshwar-based Regional Medical Research Centre; and

(b) if so, what are the details of the report?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) and (b) Yes Sir. A fact finding team was deputed by ICMR to Regional Medical Research Centre, Bhubneshwar. The team has found certain administrative/financial irregularities and the Council has been advised to take appropriate action in the matter.

Conditions for grant of concessions to charitable hospitals

999. SHRI RAGHAVJI: Will the PRIME MINISTER be pleased to state:

(a) what are the details of conditions subject to which different charitable and other hospitals in the Capital have been granted different kinds of concessions and grants as on date; and

(b) what is the mechanism to ensure the adherence thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Delhi Development Authority have informed that the hospital sites are allotted to the Registered Societies on the recommendations of the Government of NCT of Delhi with the condition that hospitals will provide 25% of their services to the poor people.

(b) If any communication is received by Delhi Development Authority about any hospital regarding the non-providing of the free treatment, action is initiated as per rules against the Society to whom the land has been allotted.

Spread of incurable tuberculosis and malignant malaria in the country

1000. SHRI K.M. SAIFULLAH: Will the PRIME MINISTER be pleased to state:

(a) whether Government have taken note of the World Bank study report that a virtually incurable form of tuberculosis is spreading world-wide and India is one of the spots;

(b) whether there has also been an alarming increase in malignant malaria in various parts of the country; and

(c) whether Government contemplate any planned afforts to prevent these diseases from becoming epidemic

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes Sir.

(b) No, Sir. While the total incidence of malaria has been contained between two or three million cases, there has been a decline in total P-falciparum cases from 613005 in 1996 to 469866 in 1997 for the corresponding periods.

(c) The Government have launched the Revised National Tuberculosis Control Programme and the Enhanced Malaria Control Project to effectively control the spread of these diseases.

Ineffectiveness of Vaccines Manufactured by Haffkine Institute

1001. DR. Y. LAKSHMI PRASAD: Will the PRIME MINISTER be pleased to state:

(a) whether it is a fact that the DPT vaccine manufactured by Haffkine Institute in India for whooping cough was found ineffective in Sri Lanka;

(b) whether it is also a fact that the polio vaccine as well as the anti-venom vaccine made by the Institute had also been found ineffective in the past in Sri Lanka;

(c) how Sri Lanka has reacted to the failure of the DPT vaccine; and

(d) whether this issue has been investigated and any steps taken to strengthen the safety testing of vaccines produced by the Haffkine institute?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) to (d) No official details from Sri Lankan Government about alleged ineffective DPT vaccine manufactured and supplied by M/s Haffkine Institute, Bombay to Sri Lanka have been received. However based upon a newspaper report about the alleged failure of DPT vaccine supplied by M/s Haffkine Institute, the matter was taken up with the High Commission of India at Sri Lanka. Investigations were also conducted at the manufacturers end and clarifications were sought from the Company. The investigation conducted by Directorate General of Health Service revealed that 7 batches of DPT vaccine manufactured by M/s Haffkine were supplied through STC to Sri Lanka in 1996-97. All the batches were released after proper testing. The protocols of manufacture and testing as well as samples of the batches, were also examined by Central Drug Laboratory, Kasauli as per general requirement for all vaccine manufactured under EPI programme in the Country. These batches were released after necessary clearance from Central Drug Laboratory.

No complaint has been received about Polio vaccine and anti-venom serum manufactured by M/s Haffkine Pharma.

According to the information received from the High Commission of India in Sri Lanka a committee of enquiry of retired judges has been appointed by the Sri Lankan President to investigate the alleged defective quality of vaccine and observance of procedures in awarding the tender.

Disease Surveillance Programme

1002. SHRI W. ANGOU SINGH: Will the PRIME MINISTER be pleased to state:

(a) the number of States where the nation-wide disease surveillance programme and training of rapid response team for epidemic diseases have been started;

(b) whether the said programme has been extended to the North-eastern States;

(c) whether any request has been received from the Regional Institute of